

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>NVN5259TLF</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/30/2009</b>
NAME OF PROVIDER OR SUPPLIER  <b>HEAVEN BOUND LIFESTYLE CENTER - WILDER ST</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>1912 WILDER ST RENO, NV 89512</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
T 000	Initial Comments  Surveyor: 20773  This findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.  This Statement of Deficiencies was generated as a result of a State Licensure survey conducted at your facility on 11/30/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.  The facility is licensed for five residential program beds for transitional living for released offenders. The census at the time of the survey was five. Five client files were reviewed and two employee files were reviewed.	T 000		
T 160 SS=F	449.154969(4) Preparations for disasters/emergencies  NAC 449.154969 Preparations for disasters and other emergencies. 4. Each facility shall conduct a drill for evacuation of the facility at least once each quarter and shall ensure that each shift of the staff of the facility participates in such a drill at least annually.  This Regulation is not met as evidenced by: Surveyor: 20773 Based on record review on 11/30/09, the facility had no record of evacuation drills conducted on a	T 160		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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T 160	Continued From page 1  quarterly basis.  Severity: 2 Scope: 3	T 160			
T 355 SS=F	449.154987(1)(a) First aid  NAC 449.154987 First aid. 1. A first-aid kit must be available at the facility. The first-aid kit must include, without limitation: (a) A germicide safe for use by humans;  This Regulation is not met as evidenced by: Surveyor: 20773 Based on observation on 11/30/09, the facility failed to have a first aid kit including a germicide.  Severity: 2 Scope: 3	T 355			
T 360 SS=F	449.154987(1)(b) First aid  NAC 449.154987 First aid. 1. A first-aid kit must be available at the facility. The first-aid kit must include, without limitation: (b) Sterile gauze pads;  This Regulation is not met as evidenced by: Surveyor: 20773 Based on observation on 11/30/09, the facility failed to have a first aid kit containing sterile gauze pads.  Severity: 2 Scope: 3	T 360			
T 365 SS=F	449.154987(1)(c) First aide  NAC 449.154987 First aid. 1. A first-aid kit must be available at the	T 365			

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T 365	Continued From page 2  facility. The first-aid kit must include, without limitation: (c) Adhesive bandages, rolls of gauze and adhesive tape;  This Regulation is not met as evidenced by: Surveyor: 20773 Based on observation on 11/30/09, the facility failed to have a first aid kit containing adhesive bandages, rolls of gauze and adhesive tape.  Severity: 2 Scope: 3	T 365			
T 370 SS=F	449.154987(1)(d) First aid  NAC 449.154987 First aid. 1. A first-aid kit must be available at the facility. The first-aid kit must include, without limitation: (d) Disposable gloves;  This Regulation is not met as evidenced by: Surveyor: 20773 Based on observation on 11/30/09, the facility failed to have a first aid kit containing disposable gloves.  Severity: 2 Scope: 3	T 370			
T 375 SS=F	449.154987(1)(e) First aid  NAC 449.154987 First aid. 1. A first-aid kit must be available at the facility. The first-aid kit must include, without limitation: (e) A shield or mask to be used by a person	T 375			

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T 375	Continued From page 3  who is administering cardiopulmonary resuscitation; and  This Regulation is not met as evidenced by: Surveyor: 20773 Based on observation on 11/30/09, the facility failed to have a first aid kit containing a cardiopulmonary resuscitation (CPR) mask.  This was a repeat deficiency from the initial state licensure survey dated 5/15/08.  Severity: 2 Scope: 3	T 375			
T 380 SS=F	449.154987(1)(f) First aid  NAC 449.154987 First aid. 1. A first-aid kit must be available at the facility. The first-aid kit must include, without limitation: (f) A thermometer or other device that may be used to determine the bodily temperature of a person.  This Regulation is not met as evidenced by: Surveyor: 20773 Based on observation on 11/30/09, the facility failed to have a first aid kit containing a thermometer or other device to determine the bodily temperature of a person.  Severity: 2 Scope: 3	T 380			
T 395 SS=F	449.154989(1)(b) Medication  NAC 449.154989 Medication. 1. Medication for self-administration may be	T 395			

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T 395	Continued From page 4  kept at the facility. That medication must: (b) Be stored and controlled in a manner that protects the medication from unauthorized use; and  This Regulation is not met as evidenced by: Surveyor: 20773 Based on observation and interview on 11/30/09, the facility did not have a method to store and control client medications that protected the medications from unauthorized use.  Findings include:  The house manager reported the facility's clients self-administered their own medications and kept them in their rooms. The manager stated the medications were not locked in a box or in a cabinet. Resident #5 had prescription medications stored on his bedside refrigerator that were not secured.  This was a repeat deficiency from the initial State Licensure survey dated 5/15/08.  Severity: 2 Scope: 3	T 395			
T 500 SS=F	449.154997(1)(c) Files for residents  NAC 449.154997 Files for residents. 1. An administrator shall ensure that the facility maintains a separate file for each resident of the facility and retains the file for at least 5 years after the resident permanently leaves the facility. The file must be kept locked in a location that is protected against unauthorized use. Each file must contain the information obtained by the facility that is related to the resident, including, without limitation:	T 500			

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T 500	Continued From page 5  (c) Evidence of compliance with the provisions of NAC 441A.380  This Regulation is not met as evidenced by: Surveyor: 20773 Based on record review on 11/30/09, the facility did not ensure that 2 of 5 clients met the requirements of NAC 441A.380 concerning tuberculosis. ( Resident #1 and #3 lacked evidence of a two-step tuberculosis skin test).  This was a repeat deficiency from the initial state licensure survey dated 5/15/08.  Severity: 2 Scope: 3	T 500			
T 560 SS=F	449.154999(6) Safety from fire  NAC 449.154999 Safety from fire. 6. Smoke detectors installed in a facility must be maintained in proper operating condition at all times and must be tested monthly. The results of the tests conducted pursuant to this subsection must be recorded and maintained at the facility.  This Regulation is not met as evidenced by: Surveyor: 20773 Based on record review on 11/30/09, the facility failed to maintain records of monthly smoke detector testing.  Severity: 2 Scope: 3	T 560			

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